



OFFICE OF HIGHWAY SAFETY
Sobriety Checkpoint Campaign Statistical Reporting Form

DATE _____

AGENCY _____

REPORTING PERSON _____

TIME _____

LOCATION _____

Please fax this form by 10:00 AM the day following the enforcement activity to:

Office of Highway Safety
Attention: Roger Minner
Fax number 302.739.5995

	STATS FROM CHECKPOINT	STATS FROM SAT PATROL(S)
# of Officers Worked		
Total Hours Worked		
Total Vehicles Stopped		
Total Drivers Detained for Further Investigation		
DUI Arrests		
Seatbelt Assessments		
Child Restraint Arrests		
Cell Phone Arrests		
Other Traffic Arrests		
Wanted Persons Apprehensions		
Stolen Vehicles Recovered		
Drug Arrests		
Felony Arrests		
Underage Drinking Violations		
Number of Weapons Seized		
Other Criminal Arrests		
Comments:		